



SUBMIT TO: PINELLAS COUNTY BOARD OF COUNTY COMMISSIONERS 400 S. FT. HARRISON AVENUE ANNEX BUILDING – 6 TH FLOOR CLEARWATER, FL 33756	 <h1 style="text-align: center;">INVITATION TO BID</h1>
ISSUE DATE: April 13, 2017	BID SUBMITTALS RECEIVED AFTER SUBMITTAL DATE & TIME WILL NOT BE CONSIDERED
TITLE: Carpet Maintenance Cleaning Services - Various Buildings	BID NUMBER: 167-0216-B (JJ)
SUBMITTAL DUE: May 16, 2017 @ 3:00 P.M. AND MAY NOT BE WITHDRAWN FOR 90 DAYS FROM DATE LISTED ABOVE.	SITE VISIT DATES & LOCATIONS: MANDATORY
DEADLINE FOR WRITTEN QUESTIONS: May 5, 2017 BY 3:00 P.M. SUBMIT QUESTIONS TO: JIM JUST AT jjust@pinellascounty.org Phone: 727-464-3205 Fax: 727/464-3925	Listing specified on Page 14.
<p style="text-align: center;"><u>THE MISSION OF PINELLAS COUNTY</u> Pinellas County Government is committed to progressive public policy, superior public service, courteous public contact, judicious exercise of authority and sound management of public resources to meet the needs and concerns of our citizens today and tomorrow.</p>	 Director of Purchasing

NOTE: BIDS ARE TO BE SUBMITTED IN DUPLICATE

BIDDER MUST COMPLETE THE FOLLOWING

BIDDERS ARE CAUTIONED THAT THE POLICY OF THE BOARD OF COUNTY COMMISSIONERS, PINELLAS COUNTY, IS TO ACCEPT THE LOWEST RESPONSIBLE BID RECEIVED MEETING SPECIFICATIONS. NO CHANGES REQUESTED BY A BIDDER DUE TO AN ERROR IN PRICING WILL BE CONSIDERED AFTER THE BID OPENING DATE AS ADVERTISED. BY SIGNING THIS PROPOSAL FORM BIDDERS ARE ATTESTING TO THEIR AWARENESS OF THIS POLICY AND ARE AGREEING TO ALL OTHER BID TERMS AND CONDITIONS, INCLUDING ALL INSURANCE REQUIREMENTS.

PAYMENT TERMS: 6 % 30 DAYS, NET 45 (PER F.S. 218.73)

*BID DEPOSIT, IF REQUIRED, IS ATTACHED IN THE AMOUNT OF \$ _____

BIDDER (COMPANY NAME): Geyen Group South Inc

DIBIA Geyen Group South
 CITY / STATE / ZIP Tampa, FL 33607

MAILING ADDRESS: 1708 W. Cypress St.

COMPANY EMAIL ADDRESS: theresa@geyengroup.com

PHN: (813) 727-0458 FAX: (813) 882-0325

*REMIT TO NAME: Geyen Group South Inc
 (As Shown On Company Invoice)

CONTACT NAME: Theresa Cardoso

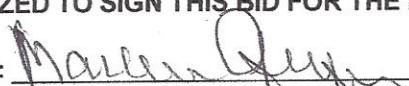
FEIN# 20-2019686

Proper Corporate Identity is needed when you submit your bid, especially how your firm is registered with the Florida Division of Corporations. Please visit www.sunbiz.org for this information. It is essential to return a copy of your W-9 with your bid. Thank you.

PRINT NAME: Theresa Cardoso

EMAIL ADDRESS: theresa@geyengroup.com

I HEREBY AGREE TO ABIDE BY ALL TERMS AND CONDITIONS OF THIS BID, INCLUDING ALL INSURANCE REQUIREMENTS & CERTIFY I AM AUTHORIZED TO SIGN THIS BID FOR THE BIDDER.

AUTHORIZED SIGNATURE: 

PRINT NAME/TITLE: Marken Geyen, CEO

FORMS CHECKLIST	
COPY OF COMPANY INVOICE	<input type="checkbox"/>
W-9 (TAXPAYER ID)	<input type="checkbox"/>

SEE PAGE 37 SECTION F FOR BID PRICING SUMMARY

THIS FORM MUST BE RETURNED WITH YOUR RESPONSE

SECTION F – BID SUMMARY – REVISED – ADDENDUM NO. 2

Bid Title: Carpet Maintenance Cleaning Services - Various Buildings

Bid Number: 167-0216-B (JJ)

GROUP CLEANING TYPE	PRICE PER CLEANING	TOTAL ANNUAL CLEANINGS	ANNUAL CLEANINGS SUB TOTAL	5 YEAR CLEANINGS MULTIPLIER	5 YEAR TOTAL COST
(1) REM Northwest – North	"A"	"B"	A x B = "C"	"D"	C x D
High Traffic Cleaning	\$ 9254	6	\$ 55,524	5	\$ 277,620
Moderate Traffic Cleaning	\$ 5185	2	\$ 10,370	5	\$ 51,850
Low Traffic Cleaning	\$ 13,987	1	\$ 13,987	5	\$ 69,935
Program Cleaning Basement	\$ 111	12	\$ 1332	5	\$ 6,660
(2) REM Northwest – Mid					
High Traffic Cleaning	\$ 3719	6	\$ 22,314	5	\$ 111,570
Moderate Traffic Cleaning	\$ 3513	2	\$ 7026	5	\$ 35,130
Low Traffic Cleaning	\$ 4261	1	\$ 4261	5	\$ 21,305
(3) REM Southeast – Central					
High Traffic Cleaning	\$ 0	6	\$ 0	5	\$ 0
Moderate Traffic Cleaning	\$ 12,252	2	\$ 24,504	5	\$ 122,520
Program Cleaning County Justice Center	\$ 5072	4	\$ 20,288	5	\$ 101,440
Program Cleaning Weedon Island Education Center	\$ 306	4	\$ 1224	5	\$ 6,120

SECTION F – BID SUMMARY – REVISED – ADDENDUM NO. 2

GROUP CLEANING TYPE	PRICE PER CLEANING	TOTAL ANNUAL CLEANINGS	ANNUAL CLEANING COST SUB TOTAL	5 YEAR CLEANINGS MULTIPLIER	5 YEAR TOTAL COST
(4) REM Detention	("A")	("B")	A x B = ("C")	("D")	C x D
High Traffic Cleaning	\$ 558	6	\$ 3348	5	\$ 16,740
Program Cleaning REM Detention Moderate	\$ 2372	4	\$ 9488	5	\$ 47,440
Program Cleaning REM Detention Low Moisture	\$ 238	4	\$ 952	5	\$ 4760
Program Cleaning SASB Video Visitation	\$ 175	12	\$ 2100	5	\$ 10,500
(5) REM Southeast – South					
High Traffic Cleaning	\$ 3429	6	\$ 20,574	5	\$ 102,870
Moderate Traffic Cleaning	\$ 882	2	\$ 1764	5	\$ 8820
Low Traffic Cleaning	\$ 4270	1	\$ 4270	5	\$ 21,350
(6) REM Real Property					
Moderate Traffic Cleaning	\$ 218	2	\$ 436	5	\$ 2180
Low Traffic Cleaning	\$ 62	1	\$ 62	5	\$ 310
(6) REM Real Property (as needed)					
High Traffic Cleaning	\$ 540	6	\$ 3240	5	\$ 16,200
Moderate Traffic Cleaning	\$ 3827	2	\$ 7654	5	\$ 38,270
Low Traffic Cleaning	\$ 0	1	\$ 0	5	\$ 0

SECTION F – BID SUMMARY – REVISED – ADDENDUM NO. 2

Building area figures are approximate. The Contractor is responsible for verifying dimensions, densities, quantities and other applicable conditions.

Optional Services: (Will not be used to determine award and is not guaranteed as part of the contract and must be properly authorized by the County before performed.)

Price per Square Foot for Adding Areas of Carpet Maintenance:

Type of Traffic	Cost per Square Foot
High	\$.05
Moderate	\$.05
Low	\$.05

Unspecified Work: Not to exceed \$25,000.00 annually.

Unspecified work is defined as services that may be required due to unexpected conditions, events, or the addition of locations not specifically listed in this bid or the additional yearly cleanings of specified locations. Unspecified work is not guaranteed as part of the contract and must be properly authorized by the County before work is performed.

Items to Include with Bid Submittal	
	Completed Page 1 of this ITB.
	Completed Page 22, Vendor References Sheet
	Completed Page 38-40, Bid Summary Sheets
	Completed Page 41 W-9 (Taxpayer ID)
	Completed Page 42, Addenda Acknowledgement Form (If Applicable)
	Copy of company invoice
	Certificates of Insurance
	Bidder shall submit with their bid a sample annual and monthly calendar of schedule services based on the locations within this specification.

An award may not be issued without proof that your firm is registered with the Florida Division of Corporations, as per Florida Statute §607.1501 (<http://www.flsenate.gov/Laws/Statutes/2011/607.1501>).

A foreign corporation (foreign to the State of Florida) may not transact business in this state until it obtains a certificate of authority from the Department of State. Please visit www.sunbiz.org for this information on how to become registered.

SECTION G - ADDENDA ACKNOWLEDGMENT FORM

Bid Title: Carpet Maintenance Cleaning Services - Various Buildings

Bid No: 167-0216-B (JJ)

PLEASE ACKNOWLEDGE RECEIPT OF ADDENDA FOR THIS ITB/RFP BY SIGNING AND DATING BELOW:

ADDENDUM NO. SIGNATURE/PRINTED NAME DATE RECEIVED

ADDENDUM NO.	SIGNATURE/PRINTED NAME	DATE RECEIVED
1	<i>Theresa Cardoso</i> Theresa Cardoso	4.14.17
2	<i>Theresa Cardoso</i> Theresa Cardoso	5.5.17

Note: Prior to submitting the response to this solicitation, it is the responsibility of the firm submitting a response to confirm if any addenda have been issued. If such document(s) has been issued, acknowledge receipt by signature and date in section above. Failure to do so may result in being considered non-responsive or result in lowering the rating of a firm's proposal.

Information regarding Addenda issued is available on the Purchasing Department's website at, www.pinellascounty.org/purchase/Current Bids1.htm, listed under category 'Current Bids'.



CERTIFICATE OF LIABILITY INSURANCE

GEYEN-1

OP ID: JK

DATE (MM/DD/YYYY)

04/28/2017

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Professional Ins. Services 3836 W. Humphrey St. Tampa, FL 33614 Greg Todd	CONTACT NAME: Jason Levy PHONE (A/C, No, Ext): 813-963-6701 E-MAIL ADDRESS: jason@pro-insuranceservices.com	FAX (A/C, No): 813-356-0951	
	INSURER(S) AFFORDING COVERAGE		NAIC #
INSURED Geyen Group South, Inc. MBG Buildings, LLC 1708 W Cypress St Tampa, FL 33606	INSURER A: Ohio Security Insurance Co		24082
	INSURER B: FirstComp		
	INSURER C: RLI Surety Florida		13056
	INSURER D: Wesco Insurance Company		
	INSURER E: INSURER F:		

COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

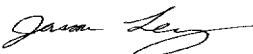
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:	X	X	BKS56711043	06/20/2016	06/20/2017	EACH OCCURRENCE \$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000
							MED EXP (Any one person) \$ 15,000
							PERSONAL & ADV INJURY \$ 1,000,000
							GENERAL AGGREGATE \$ 2,000,000
							PRODUCTS - COMP/OP AGG \$ 2,000,000
							\$
D	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS			WPP1470291-00	06/20/2016	06/20/2017	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
							BODILY INJURY (Per person) \$
							BODILY INJURY (Per accident) \$
							PROPERTY DAMAGE (Per accident) \$
							\$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10,000	X	X	USO56711043	06/20/2016	06/20/2017	EACH OCCURRENCE \$ 3,000,000
							AGGREGATE \$ 3,000,000
							\$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	MWC0101925-01	10/14/2016	10/14/2017	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER
							E.L. EACH ACCIDENT \$ 1,000,000
							E.L. DISEASE - EA EMPLOYEE \$ 1,000,000
							E.L. DISEASE - POLICY LIMIT \$ 1,000,000
A	Bailee			BKS56711043	06/20/2016	06/20/2017	Limit 100,000
C	Dishonesty Bond			LFM0022812	09/30/2016	09/30/2017	Limit 100,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Certificate holder is named as Additional Insured with respect to General Liability and Excess Liability. Waiver of Subrogation is in favor of certificate holder with regards to General Liability and Excess Liability.

CERTIFICATE HOLDER**CANCELLATION**

PINEL15 Pinellas County % Ebix RCS PO Box 100085 Ref # 96-Z366650 Duluth, GA 30096	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
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Blank notepad area for notes.

Seal of Approval—Service Provider

The Carpet and Rug
Institute

This certificate is presented to

**Geyen Group, Inc.
Tampa, Florida**

*As a Certified Service Provider under
The Carpet and Rug Institute
Seal of Approval Program*

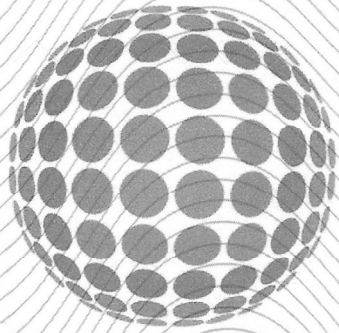
Pat Young

Coordinator—Seal of
Approval program

September 5, 2007

Date





IICRC

Institute of Inspection Cleaning
and Restoration Certification

CERTIFIED FIRM

2017

be it known that:

GEYEN GROUP SOUTH, INC

Is registered with IICRC, and has pledged to implement an advanced training program and a course of study leading to the certification of all On-Location Operators actively engaged in providing services to the consumer in cleaning and restoration and has pledged its support in establishing and maintaining a professional attitude in the conduct of its daily business at all times and providing the consumer with the highest degree of professionalism possible.



Peter P. Duncanson
Chair of the Board of Directors

Company Number 134603

Valid Through 12-31-2017



IICRC

International Institute of Cleaning and Restoration Certification

Be it known that
FRANCISCO ALVAREZ
is certified in these areas:

**COMMERCIAL CPT MAINTENANCE
UPHOLSTERY & FABRIC CLEANING**

194250

Register Number



255708

6/2017

Expiration Date



IICRC

International Institute of Cleaning and Restoration Certification

Be it known that
ORLANDO BRINGUIER
is certified in these areas:

**COMMERCIAL CPT MAINTENANCE
UPHOLSTERY & FABRIC CLEANING**

218410

Register Number



283074

6/2017

Expiration Date



IICRC

International Institute of Cleaning and Restoration Certification

Be it known that
OSLEBIS YERO TORRES
is certified in these areas:

UPHOLSTERY & FABRIC CLEANING

230967

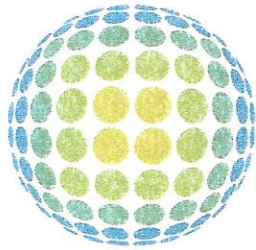
Register Number



296749

5/2017

Expiration Date



IICRC

Institute of Inspection Cleaning
and Restoration Certification

be it known that:

FRANCISCO GARCIA

Is a registrant in good standing with IICRC, and has qualified by service and examination for
Certification in the following areas:

UPHOLSTERY & FABRIC CLEANING

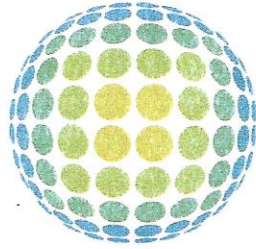
and has pledged to perform services in these areas with skill, honesty,
and integrity in order to provide the consumer with the highest degree
of professionalism possible.

230961

REGISTER NUMBER

5/2017

EXPIRATION DATE



IICRC

Institute of Inspection Cleaning
and Restoration Certification

be it known that:

FERNANDO PALOMARES MORALES

Is a registrant in good standing with IICRC, and has qualified by service and examination for
Certification in the following areas:

UPHOLSTERY & FABRIC CLEANING

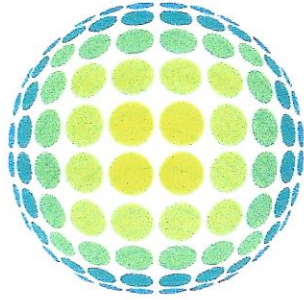
and has pledged to perform services in these areas with skill, honesty,
and integrity in order to provide the consumer with the highest degree
of professionalism possible.

230966

REGISTER NUMBER

5/2017

EXPIRATION DATE



IICRC

Institute of Inspection Cleaning
and Restoration Certification

be it known that:

SANTIAGO DIAZ

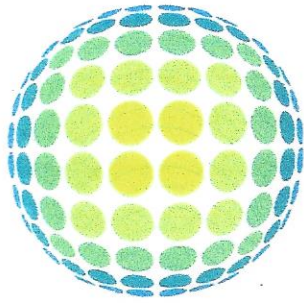
Is a registrant in good standing with IICRC, and has qualified by service and examination
for Certification in the following areas:

**COMMERCIAL CPT MAINTENANCE
UPHOLSTERY & FABRIC CLEANING**

and has pledged to perform services in these areas with skill, honesty,
and integrity in order to provide the consumer with the highest degree
of professionalism possible.

218402
REGISTER NUMBER

6/2017
EXPIRATION DATE



IICRC

Institute of Inspection Cleaning
and Restoration Certification

be it known that:

JORGE I. GIRALDO

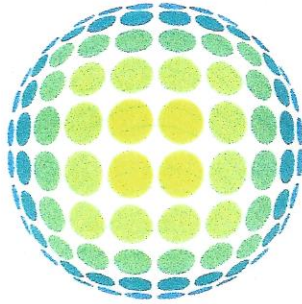
Is a registrant in good standing with IICRC, and has qualified by service and examination
for Certification in the following areas:

**COMMERCIAL CPT MAINTENANCE
UPHOLSTERY & FABRIC CLEANING**

and has pledged to perform services in these areas with skill, honesty,
and integrity in order to provide the consumer with the highest degree
of professionalism possible.

104005
REGISTER NUMBER

6/2017
EXPIRATION DATE



IICRC

Institute of Inspection Cleaning
and Restoration Certification

be it known that:

YORDAN ALVAREZ

Is a registrant in good standing with IICRC, and has qualified by service and examination
for Certification in the following areas:

**COMMERCIAL CPT MAINTENANCE
UPHOLSTERY & FABRIC CLEANING**

and has pledged to perform services in these areas with skill, honesty,
and integrity in order to provide the consumer with the highest degree
of professionalism possible.

218405
REGISTER NUMBER

6/2018
EXPIRATION DATE

GEYEN GROUP SOUTH, INC.

Invoice

TIN #20-2019686
 359 Park St. E.
 Wayzata, MN 55391

Date	Invoice #
4/30/2017	8582

Bill To
Finance Division Accts Payable Board of County Commissioners Pinellas Co PO Box 2438 Clearwater, FL 33757

Terms
Net 30

Description	Amount
PO #424450 - April 2017	
Carpet Cleaning, Group 1 - Northwest-Clearwater	5,627.94
Group 1 - DEI	1,318.15
14 SFH 1 & 2 floors request per Larry Markunus	710.01
Thank you for your business! (952)476-5953	
Total	\$7,656.10
Balance Due	\$7,656.10

Phone #	Fax #	E-mail
952-476-5953	952-476-0259	kim@geyengroup.com

SECTION D – VENDOR REFERENCES

Bid Title: Carpet Maintenance Cleaning Services - Various Buildings

Bid Number: 167-0216-B (JJ)

THE FOLLOWING INFORMATION IS REQUIRED IN ORDER THAT YOUR BID MAY BE REVIEWED AND PROPERLY EVALUATED.

COMPANY NAME: Geyen Group South Inc

LENGTH OF TIME COMPANY HAS BEEN IN BUSINESS: 38 years; 13 years as Geyen Group

BUSINESS ADDRESS: 1708 W. Cypress St. Tampa, FL 33607

HOW LONG IN PRESENT LOCATION: 5 years

TELEPHONE NUMBER: 813-882-9655 FAX NUMBER: 813-882-0325

TOTAL NUMBER OF CURRENT EMPLOYEES: 7 FULL TIME 6 PART TIME

NUMBER OF EMPLOYEES YOU PLAN TO USE TO SERVICE THIS CONTRACT: 9

All references will be contacted by a County Designee via email, fax, mail or phone call to obtain answers to questions, as applicable before an evaluation decision is made.

LOCAL COMMERCIAL AND/OR GOVERNMENTAL REFERENCES THAT YOU HAVE PREVIOUSLY PERFORMED SIMILAR CONTRACT SERVICES FOR:

1. COMPANY: Pinellas County

ADDRESS: 509 East, Clearwater, FL

TELEPHONE/FAX: 727-464-4485

CONTACT: Amanda Kempton

CONTACT EMAIL: akempton@pinellascounty.org

COMPANY EMAIL ADDRESS: _____

2. COMPANY: City of Tampa

ADDRESS: 1550 N. Grady Ave, Tampa 33607

TELEPHONE/FAX: 813-348-1047; 813-348-1050

CONTACT: Luis Alcantara

CONTACT EMAIL: luis.alcantara@tampagov.net

COMPANY EMAIL ADDRESS: _____

3. COMPANY: Hillsborough County

ADDRESS: 601 E. Kennedy Blvd, Tampa 33602

TELEPHONE/FAX: 813-276-2919

CONTACT: Wendy Grimes

CONTACT EMAIL: GrimesW@hillsboroughcounty.org

COMPANY EMAIL ADDRESS: _____

4. COMPANY: Suncoast Credit Union

ADDRESS: 6801 E. Hillsborough Ave, Tampa

TELEPHONE/FAX: 813-621-1511 x.81322

CONTACT: Shane Hill

CONTACT EMAIL: shane.hill@suncoastcreditunion.com

COMPANY EMAIL ADDRESS: _____

May 2017

Geyen Group South carpet cleaning Pinellas County

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday																																																																																																												
	1 Group 2: Weedon Island Group 2:CJC: H wing 2-4 floor all areas	2 Group3: Detention: South: classrooms, juvenile, law library, lts office, hall, MP room, A wing Majors office,136-137, transp office	3 Group 3 Detention: SASB 1 East, 2nd floor; video visitation	4 Group 3 Detention: SASB 1st floor Annex (West)	5	6 Group 2 SE Central CJC: 1st floor all areas: Sheriff, 1200, 1250, 1300, 1400, CR 23, 1445,1500, 1600, Dining, FM 1900, 1930, entrances																																																																																																												
7	8 Group 1: Mid: PSC: Comm Ctr 12:00 am all areas	9 Group 2 CJC: Clerk of Court high traffic Group 2: Sheriff Techs 1,2,3 3 pm	10 Group 1 Mid: PSC EOC all areas	11 Group 1: Mid: PSC: PCSO 2nd & 3rd high traffic Group 1: Mid: SOE high traffic	12 Group 4: South: 66th St high traffic; Human Services high traffic	13 Group 4: South: Judicial all areas																																																																																																												
14	15 Group 1: Mid: PCR all areas 5 pm	16 Group 1: Mid: Heritage Village 2 pm	17 Group 1: Mid: Field Services Group 1: Mid: Fleet all areas	18 Group 1: NW: 29582 high traffic Utilities:Wm Dunn high traffic	19 Group 1: Clwtr: 315 4th floor red high traffic	20																																																																																																												
21	22 Group 1: NW: 440 1 & 2 all areas	23 Group 1: Brooker Creek 10 am Utilities Keller Water	24 Group 1: Clwtr: 631 red, 520 red, 303 red, 510 red; 333 red, 324B red	25 Group 1: NW: 440 3 & 4 all areas	26 Utilities GMD South all areas	27 Group 1: NW: 14 SFH 1st-6th high traffic; 5th all areas																																																																																																												
28	29	30 Group1: N County: 315 5th high & moderate; 6th high traffic	31	<table border="1" style="margin: auto; border-collapse: collapse;"> <tr> <th colspan="7" style="padding: 2px;">Apr 2017</th> </tr> <tr> <th style="padding: 2px;">S</th> <th style="padding: 2px;">M</th> <th style="padding: 2px;">T</th> <th style="padding: 2px;">W</th> <th style="padding: 2px;">T</th> <th style="padding: 2px;">F</th> <th style="padding: 2px;">S</th> </tr> <tr> <td style="padding: 2px;"></td> <td style="padding: 2px;"></td> <td style="padding: 2px;"></td> <td style="padding: 2px;"></td> <td style="padding: 2px;"></td> <td style="padding: 2px;"></td> <td style="padding: 2px; text-align: center;">1</td> </tr> <tr> <td style="padding: 2px;">2</td> <td style="padding: 2px;">3</td> <td style="padding: 2px;">4</td> <td style="padding: 2px;">5</td> <td style="padding: 2px;">6</td> <td style="padding: 2px;">7</td> <td style="padding: 2px;">8</td> </tr> <tr> <td style="padding: 2px;">9</td> <td style="padding: 2px;">10</td> <td style="padding: 2px;">11</td> <td style="padding: 2px;">12</td> <td style="padding: 2px;">13</td> <td style="padding: 2px;">14</td> <td style="padding: 2px;">15</td> </tr> <tr> <td style="padding: 2px;">16</td> <td style="padding: 2px;">17</td> <td style="padding: 2px;">18</td> <td style="padding: 2px;">19</td> <td style="padding: 2px;">20</td> <td style="padding: 2px;">21</td> <td style="padding: 2px;">22</td> </tr> <tr> <td style="padding: 2px;">23</td> <td style="padding: 2px;">24</td> <td style="padding: 2px;">25</td> <td style="padding: 2px;">26</td> <td style="padding: 2px;">27</td> <td style="padding: 2px;">28</td> <td style="padding: 2px;">29</td> </tr> <tr> <td style="padding: 2px;">30</td> <td style="padding: 2px;"></td> <td style="padding: 2px;"></td> <td style="padding: 2px;"></td> <td style="padding: 2px;"></td> <td style="padding: 2px;"></td> <td style="padding: 2px;"></td> </tr> </table>			Apr 2017							S	M	T	W	T	F	S							1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30							<table border="1" style="margin: auto; border-collapse: collapse;"> <tr> <th colspan="7" style="padding: 2px;">Jun 2017</th> </tr> <tr> <th style="padding: 2px;">S</th> <th style="padding: 2px;">M</th> <th style="padding: 2px;">T</th> <th style="padding: 2px;">W</th> <th style="padding: 2px;">T</th> <th style="padding: 2px;">F</th> <th style="padding: 2px;">S</th> </tr> <tr> <td style="padding: 2px;"></td> <td style="padding: 2px;"></td> <td style="padding: 2px;"></td> <td style="padding: 2px;"></td> <td style="padding: 2px;"></td> <td style="padding: 2px;"></td> <td style="padding: 2px; text-align: center;">1 2 3</td> </tr> <tr> <td style="padding: 2px;">4</td> <td style="padding: 2px;">5</td> <td style="padding: 2px;">6</td> <td style="padding: 2px;">7</td> <td style="padding: 2px;">8</td> <td style="padding: 2px;">9</td> <td style="padding: 2px;">10</td> </tr> <tr> <td style="padding: 2px;">11</td> <td style="padding: 2px;">12</td> <td style="padding: 2px;">13</td> <td style="padding: 2px;">14</td> <td style="padding: 2px;">15</td> <td style="padding: 2px;">16</td> <td style="padding: 2px;">17</td> </tr> <tr> <td style="padding: 2px;">18</td> <td style="padding: 2px;">19</td> <td style="padding: 2px;">20</td> <td style="padding: 2px;">21</td> <td style="padding: 2px;">22</td> <td style="padding: 2px;">23</td> <td style="padding: 2px;">24</td> </tr> <tr> <td style="padding: 2px;">25</td> <td style="padding: 2px;">26</td> <td style="padding: 2px;">27</td> <td style="padding: 2px;">28</td> <td style="padding: 2px;">29</td> <td style="padding: 2px;">30</td> <td style="padding: 2px;"></td> </tr> </table>			Jun 2017							S	M	T	W	T	F	S							1 2 3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	
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Tandus

CERTIFICATE OF EXCELLENCE

is hereby granted to

Geyen Group, Inc.

for outstanding performance and distinguished designation as a:

Preferred Tandus CertiCARE Service Provider

Granted: May 15, 2009

John J. Geyer, Tandus - Product Care Manager

Request for Taxpayer Identification Number and Certification

**Give Form to the
 requester. Do not
 send to the IRS.**

Print or type See Specific Instructions on page 2.	<p>1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.</p>	
	<p>2 Business name/disregarded entity name, if different from above <i>Greyen Group South, Inc.</i></p>	
	<p>3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input checked="" type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. <input type="checkbox"/> Other (see instructions) ▶ _____</p>	<p>4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <i>(Applies to accounts maintained outside the U.S.)</i></p>
	<p>5 Address (number, street, and apt. or suite no.) <i>359 Park St. E.</i></p>	<p>Requester's name and address (optional)</p>
	<p>6 City, state, and ZIP code <i>Wayzata, MN 55391</i></p>	
	<p>7 List account number(s) here (optional)</p>	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number										
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Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here	Signature of U.S. person ▶ <i>Marken Greyen/Pres.</i>	Date ▶ <i>01-17-2017</i>
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
 - Form 1099-C (canceled debt)
 - Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.
- If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.*
- By signing the filled-out form, you:
1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
 2. Certify that you are not subject to backup withholding, or
 3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
 4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.